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CERTIFICATE OF MAILING (37 CFR 1.8a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Denise G. Bachtel
(Type or print name of person mailing paper)

Date: August 1, 2005

Denise G. Bachtel
(Signature of person mailing paper)

AVERP3299USA

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Wayne L. Bilodeau	:	Group Art Unit:	1771	
Serial No:	10/615,808	:	Examiner:	Anish P. Desai
Filed:	July 9, 2003	:	Confirmation No:	1464
For:	LABELING METHOD EMPLOYING TWO-PART CURABLE ADHESIVES			

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

**AMENDMENT AND
RESPONSE TO RESTRICTION REQUIREMENT**

Sir:

This paper is responsive to the Office Action mailed July 6, 2005, for which a one month period of response is given. Please amend the application as follows:

Amendments to the claims are reflected in the listing that begins on page 2.

Response to Restriction Requirement begins on page 12.

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

10/615,808

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

SMALL ENTITY
TYPE

OTHER THAN
OR SMALL ENTITY

TOTAL CLAIMS	41	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	41 minus 20 =	21
INDEPENDENT CLAIMS	7 minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

RATE	FEES
BASIC FEE	375.00
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	FEES
BASIC FEE	750.00
X\$18=	375
X84=	
+280=	
TOTAL	1128

- If the difference in column 1 is less than zero, enter "0" in column 2

5/6/05 CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	42	Minus	41
Independent	3	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X42=		X84=	
+140=		+280=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	42	Minus	41
Independent	3	Minus	3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	30
X42=		X84=	
+140=		+280=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	30

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	**	=
Independent	Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X42=		X84=	
+140=		+280=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.